

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DN</i>	<i>32</i>	<i>1/29</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>TZ</i> <i>MO</i>	<i>50947</i> <i>825</i>	<i>02/14/01</i> <i>5/12/01</i>

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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